

ISSUE SLIP STAPLE AREA (for additional cross references)

09/857303

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		6	6-23-01
FORMALITY REVIEW			
RESPONSE FORM REVIEW			

BEST AVAILABLE COPY

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1		3/21/03	
2		1/11/03	
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Claim	Final	Original	Date
51		3/21/03	
52		7/11/03	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
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